



DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other  _____ _____ _____
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Work Order ID 114171

\*114171\*

Page 2

March-04-14 2:56:03 PM

Item ID: D3017-11

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Cap

Start Date: 04/03/2014 Start Qty: 12.00

\*12\*

Cust Item ID:

Required Date: 04/03/2014 Req'd Qty: 12.00

\*12\*

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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120

QC8- Inspect parts - second check

0.00

\*120\*

QC

Memo

0.00

Quality Control

130

Packaging

0.00

\*130\*

Packaging

Memo

0.00

Packaging

Identify and bag with light oil (Vactra oil #2), then Stock  
Location: Waco

140

QC21- Final Inspection - Work Order Release

0.00

\*140\*

QC

Memo

0.00

Quality Control

(20)  
COUNT

20x SP14-6-10.

MLJ 14-06-10

H14-6-10

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



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# Picklist Print

Page 1

March-04-14 2:56:03 PM

Work Order ID: 114171

**\*114171\***

Parent Item: D3017-11

**\*D3017-11\***

Parent Item Name: Cap

Start Date: 04/03/2014

Required Date: 04/03/2014

Start Qty: 12.00

Required Qty: 12.00

**Comments:**

IPP Rev:A 08-04-14 now on water jet DD verified by:EC  
as per revB DD verified by:JLM

IPP RevB:

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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M4130NS.049

Purchased

No

100

sf

91.9790

0.004

0.050526

DAS

**\*M4130NS 049\***

**\*\***

0.5

23  
9-89

14-06-8

4130 Sheet .049

Location

Loc Qty

Loc Code

MAT020

91.979

124283

91.979

124283

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



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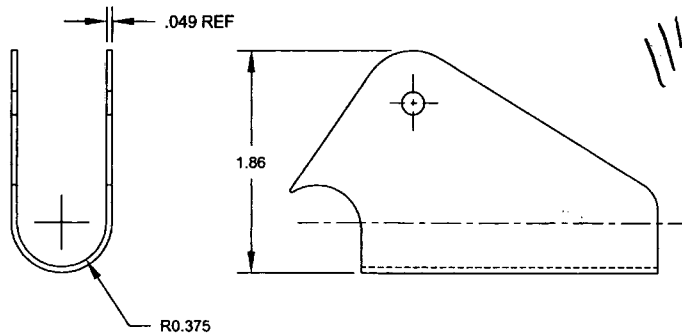
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Transport <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

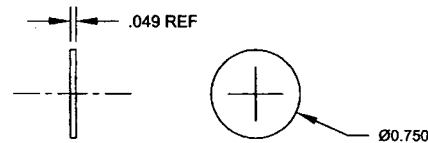
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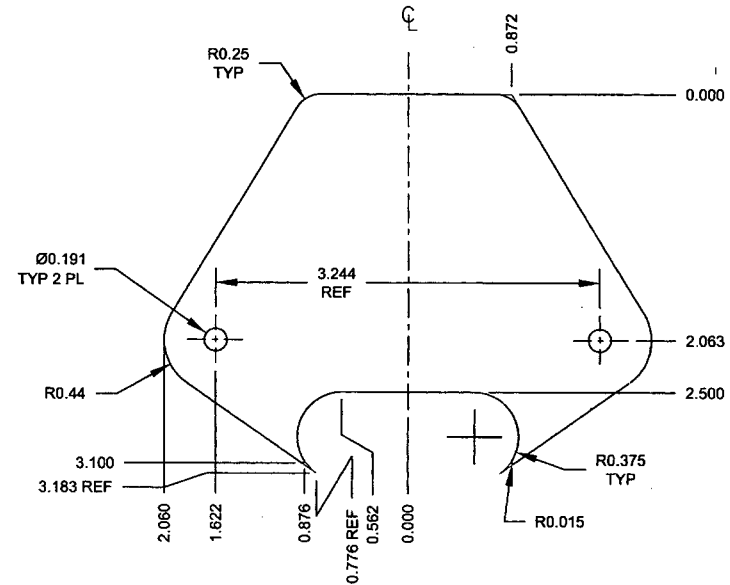
8 7 6 5 4 3 2 1



**D3017-7 LUG**  
BENDING DETAIL  
MAKE FROM D3017-7F



**D3017-11 END CAP**



**D3017-7F FLAT PATTERN**

PART IS SYMMETRIC  
ABOUT CENTERLINE

**RELEASED**  
2010-02-02

**NOTES:**

- 1) MATERIAL: AISI 4130N SHEET, 18 GAUGE (M4130N-S049)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: -7: 0.12 lbs; -11: 0.01 lbs.

DESIGN		<b>DART AEROSPACE LTD</b>	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. B
MFG. APPR.		D3017	SHEET 4 OF 4
APPROVED		TITLE	SCALE
DE APPR.		BACK FRAME ASSEMBLY	NTS
DATE	10.01.13	<small>COPYRIGHT © 2001 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

8 7 6 5 4 3 2 1